Jennifer B. Xistris

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Box Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

NEW APPLICATION TRANSMITTAL

Transmitted herewith for filing is the patent application of Thomas L. Chenevert, Hero K. Hussain, Scott D. Swanson and Vikas Gulani for Noninvasive Method To Determine Fat Content Of Tissues Using MRI.

CERTIFICATION UNDER 37 C.F.R. § 1.10

I hereby certify that this New Application Transmittal and the documents referred to as enclosed therein are being deposited with the U.S. Postal Service on this date March 23, 2004 in an envelope as "Express Mail Post Office to Addressee" Mailing Label Number EL 992 784 669 US addressed to: Box Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

1. Type Of Application

This new application is for a(n)

X Original (nonprovisional)

Papers Enclosed That Are Required For Filing Date Under 37 C.F.R. § 1.53(b) (Regular) or 37 C.F.R. § 1.153 2.

(Design) Application

23 Pages of Specification

Pages of Claims

Page of Abstract

Sheets of Formal Drawings

3. Declaration

> X Enclosed

> > × Unexecuted.

Inventorship Statement

The inventorship for all the claims in this application is:

×

the same

5. Language

> × English

6. Fee Calculation (37 C.F.R. § 1.16)

> X Regular application

CLAIMS AS FILED

	Number Filed			Number Extra	Rate	Basic Fee - \$770.00 (37 C.F.R. § 1.16(a))	
Total Claims (37 C.F.R. § 1.16(c))			1.16(c))	20 - 20 =	0 × \$18.00 =	\$0.00	
Independent Claims (37 C.F.R. § 1.16(b))				2 - 3 =	0 × \$86.00 =	\$0.00	
Multiple Dependent Claim(s), if any (37 C.F.R. § 1.16(d))				+ \$290.00 =		\$0.00	
7.	Small Entity Statement(s)			Filing Fee Calculation		\$770.00	
	Verified Statement(s) that this is a filing by a small entity under 37 C.F.R. §§ 1.9 and 1.27.						
				Fil	ing Fee Calculation (50% of above)	\$385.00	
8.	Fee Payment Being Made At This Time						
	X	Enclose	ed				
		×	basic filing fee			\$385.00	
				To	tal Fees Enclosed	\$385.00	

PATENT

Attorney Docket No.: UM-8780

9. Method of Payment of Fees

Check in the amount of \$385.00

10. Authorization To Charge Additional Fees and Credit Overpayment

The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No.: 08-1290. An originally executed duplicate of this transmittal is enclosed for this purpose.

11. Power of Attorney by Assignee

Enclosed (unexecuted)

12. Return Receipt Postcard

Enclosed

Dated: March 23, 2004

Registration No. 55,210

MEDLEN & CARROLL, LLP 101 Howard Street, Suite 350 San Francisco, California 94105 608/218-6900

Statement Where No Further Pages Added

This transmittal ends with this page.